## Oklahoma Department of Agriculture, Food & Forestry

Agricultural Environmental Management Services PO Box 528804

Oklahoma City, OK 73152

Phone: (405) 522-5892 FAX: (405) 522-6357

Rev Code# 290-01 Amount Paid:			
Card #:			
Type of Card: Master Card Visa			
Exp Date (MM/YYYY)			
Signature of Name on Card			

## **Animal Shelter Application**

Operator:			Date:		
Mailing Address:					
City:	State:	Zip:	Phone:		
County:	Email Addr	ess:			
Shelter Name:					
City:	State:	Zip:	Phone:		
County:	Email Addro	ess:			
Co-Operator (provide address,	phone number and email add	ress if different fro	om applicant):		
Shelter Location (Must include	e driving directions from neare	est municipality):_			
If applicant is an entity, please provide name & address of registered agent:					
Indicate total capacity of a	nimals:	Tax E	exempt ID: (if applicable)		
Date of commencement of	operation at this location	on:			

License fee is \$200 annually for ten or more animals

AEMS162 Revised 07/2020 Please indicate the following that apply: Been convicted of, or entered a plea of guilty or no contest, to any felony, or any crime involving animal cruelty, abuse or neglect. Received any adverse ruling from any court of competent jurisdiction or any administrative tribunal involving honesty, fraud, misrepresentation, breach of fiduciary duty, gross negligence, or incompetence in a matter related to animal sheltering, or cruelty to animals. Had an application for a license, registration, certificate, or endorsement related to animal sheltering or animal care denied or rejected by any state or federal licensing authority in Oklahoma or another state. Ever have revoked or suspended a license, registration, certificate or endorsement by an animal sheltering licensing board, kennel regulation board or similar agency. Ever surrendered a license, registration, certificate, or endorsement to the Board or any state or federal animal sheltering or kennel licensing authority, whether located in Oklahoma or elsewhere; Please provide date, subject matter & court or government entity for any individual by which the above are marked and explain: Oath of Accuracy "I certify under penalty of law that this document and all attachments are to the best of my knowledge and belief true, accurate and complete. I am aware that there are significant penalties for knowingly submitting false, inaccurate, or incomplete information." Please Print Name and Title Signature Signed or attested before me this \_\_\_\_\_\_ day of \_\_\_\_\_\_, 20\_\_\_\_\_ (NOTARY SEAL)

**Notary Public** My Commission Expires: \_\_\_\_\_ Updated: 8/19/2014

## Affidavit of Lawful Presence

All natural persons fourteen (14) years of age or older and present in the United States, applying for a license with the Oklahoma Department of Agriculture for a Commercial Pet Breeders or Shelter license are required by the provisions of 56 O.S. Supp. 2007 § 71, to provide the Oklahoma Department of Agriculture, Food, and Forestry with verification of lawful presence in the United States by executing one of the statements below.

I,	, of lawful age, being first duly sworn,					
	(Print Applicant's Name)					
upon oath	states, under penalty of pe	rjury as follows:				
	I am a United States Citizer	ι.				
	I am a qualified alien under the Federal Immigration and Naturalization Act, and I am lawfully present in the United States.					
	Provide a copy of your Pass number and expiration date	sport/Visa/Alien Registration document.	nt and write the			
Date		United States Citizen or Qualified Alien				
Signed or a	attested before me this	day of	, 20			
(NOTARY	(SEAL)					
		Notary Publi	ic			
		My Commission	Expires:			